Products...As-Is...Business Line...Medical Care

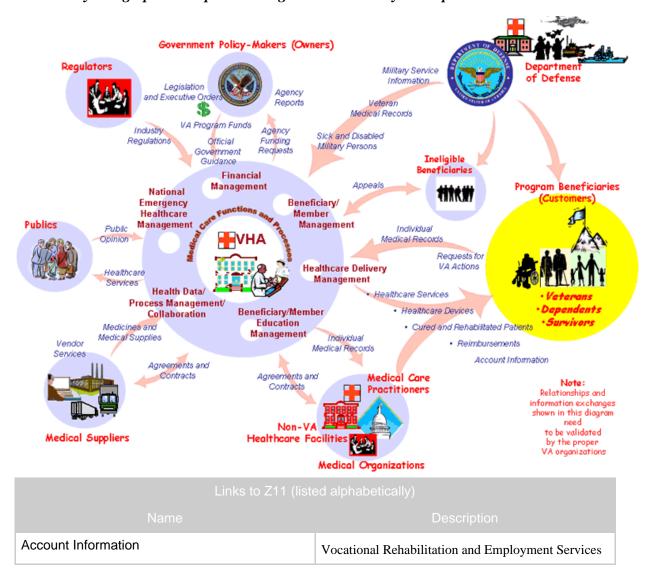
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1. Medical Care

The major functions within this business line are the six items denoted surrounding "VHA" (the agency responsible for carrying out these actions) such as Health Care delivery and Financial Management. This diagram shows the major stakeholders and some of the relationships between those stakeholders, the agency, and its denoted functions.

Scroll down for descriptions of objects shown in this diagram. Clicking over a function name can directly bring up related process diagrams and activity descriptions.



	(Master Record)
	Specific information related to a veteran's account with a VA program, which is used to support the delivery of services to the veteran and management of the overall program. Information will include: name (identity) of the veteran (to link to personal data); contact address (for the purpose of contacting the veteran for Chapter 31 related benefits); case/account number; name (identity) of beneficiary; veteran contact history; eligibility determination information; and benefit information.
Agency Funding Requests	Budget proposals and other forms of requests for funding that VA sends to Congress and other funding approval bodies.
Agency Reports	Standard and ad-hoc reports about VA operations that are prepared and submitted to external organizations and oversight groups.
Agreements and Contracts	Formal agreements and contracts with parties outside VA.
Appeals	Formal requests for reconsideration of eligibility for benefits and services administered by the Department of Veterans Affairs.
Cured and Rehabilitated Patients	People who have availed of the medical, healthcare, and rehabilitation services provided by VA.
Healthcare Devices	Hardware and other equipment given by VA to help qualified patients cope with their healthcare problems.
Healthcare Services	Healthcare services available to veterans and other program beneficiaries.
Individual Medical Records	Patient files and other medical records sent out to patients on request.
Industry Regulations	Official resource guidelines developed by outside

	industry regulatory groups.
Legislation and Executive Orders	Laws and Executive Orders that either define or limit the scope of VA activities, products and services.
Medical Organizations	Information about external medical organizations that form part of VA's information resource.
Medicines and Medical Supplies	Medicines and supplies issued by VA to patients and participating providers.
Military Service Information	Information about a military person provided by the Department of Defense that are part of VA's information resource.
Non-VA Healthcare Facilities	State or private-owned hospitals and clinics available as resources for the delivery of veteran healthcare benefits.
Official Government Guidance	Government circulars and other official guidance from external organizations that affect VA's operations.
Public Opinion	Feedback from the general public regarding the operations of the VA or ideas about any of the products and services that VA provides.
Reimbursements	Reimbursement amounts given to program beneficiaries, service partners, and other entities outside the VA organization.
Requests for VA Actions	Information contained in requests for VA action coming from sources external to VA.
VA Program Funds	Monetary resource products from external sources for use in funding VA programs.
Vendor Services	Enterprise vendor service resources provided by organizations external to VA.

Veteran Medical Records	Information on the state of a veteran's health, prior medical history, prior care, and procedures available from DOD, VA/VHA, and other sources. These may include: service medical records (field record); military clinical records; VA follow-up (routine future) exams; VA treatment reports; VA and other federal government health records; vocational rehabilitation and employment records; line of duty investigations; private physician records to include psychologist reports; private hospital records; state or local government hospital treatment records.
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Links to Z12 (listed alphabetically)	
	Description
Beneficiary/Member Care Education	Upon patient/beneficiary request, or special situations such as timed reminders, patients are provided care education in diverse settings from multiple touch points. Areas of interest may include health promotion, wellness, disease management/prevention, and use of prosthetic appliances/devices. This function also includes community outreach and self-management/service capabilities.
Beneficiary/Member Management	This function encompasses the front-end of the medical care value chain. It includes all aspects of registration, enrollment, eligibility, scheduling, and patient movement, e.g., between facilities.
Financial Management	Financial Management function includes activities related to transfer of funds between stakeholders/entities related to provision of medical care.
Healthcare Delivery Management	Healthcare Delivery and Provider Management includes Healthcare Delivery, Order Management, Healthcare Management, and Management of Providers. Health Care Delivery Services encompasses the processes by which patients are provided healthcare services, e.g., primary and ambulatory, specialty, inpatient, mental health, extended care, acute care, allied health care, rehabilitation care, domiciliary care, remote care, and nursing home in a seamless manner. High-level

Health Data/Process Management/Collaboration	activities for this function include Provide Direct Care (e.g., primary, specialized, inpatient, outpatient, dental, orthotics, mental health, prosthetic, acute, ambulatory, and emergency). This is a strategic function that encompasses the following activities: (1) Manage internal health data, and (2) Share/Exchange Health data/information with partners.
Medical Care Business Line	The mission of the Veterans Health Administration (VHA) is established by U.S.C Title 38 § 7301, "to provide a complete medical and hospital service for the medical care and treatment of veterans." VHA serves the health care needs of America's veterans through a comprehensive, integrated health care system providing primary care, specialized care, and related medical and social support services offering excellence in health care value, excellence in service as defined by its customers, and excellence in education and research. Subsequent sections of USC Title 38 define other specific medical services including: • § 1710. Hospital, nursing home, and domiciliary care. • § 1711. Care during examinations and in emergencies. • § 1712. Dental care; drugs and medicines for certain disabled veterans; vaccines. • § 1712B. Counseling for former prisoners of war. • § 1713. Medical care for survivors and dependents of certain veterans. • § 1714. Fitting and training in use of prosthetic appliances; seeing-eye dogs. • § 1716. Hospital care by other agencies of the United States. • § 1717. Home health services; invalid lifts and other devices. • § 1718. Therapeutic and rehabilitative activities. • § 1719. Repair or replacement of certain prosthetic and other appliances. • § 1720. Transfers for nursing home care; adult day health care. • § 1720A. Treatment and rehabilitative services

	for persons with drug or alcohol dependency. § 1720B. Respite care. § 1720C. Non-institutional alternatives to nursing home care. § 1720D. Counseling and treatment for sexual trauma. § 1720E. Nasopharyngeal radium irradiation. § 1751. Sickle cell anemia screening, counseling, and medical treatment. § 1752. Sickle cell anemia research. § 1771. Treatment and rehabilitation for seriously mentally ill and homeless veterans § 1803. Healthcare for children of Vietnam veterans who are born with Spina Bifida.
National Emergency Healthcare Management	VA plays a critical role during emergencies, both as an emergency coordinator and as a healthcare provider.

Links to Z14 (listed alphabetically)	
	Description
Department of Defense	An executive department of the U.S. Government consisting of the Secretary of Defense and his office, the War Council, the Joint Chiefs of Staff, Joint Staff and joint agencies, as well as the Departments of the Army, the Navy, and the Air Force. It is headed by the Secretary of Defense.
Dependents	Qualifying dependents for VA benefit purposes who may be a veteran's spouse or child (natural child, adopted child, or stepchild). A veteran's mother or father may also be considered a dependent generally if there is financial need and he or she is otherwise entitled.
Government Policy Makers (Owners)	A category of VA stakeholders. Stakeholders falling under this category possess the authority to create and enforce major government policies and regulations that affect the Department of Veterans Affairs.

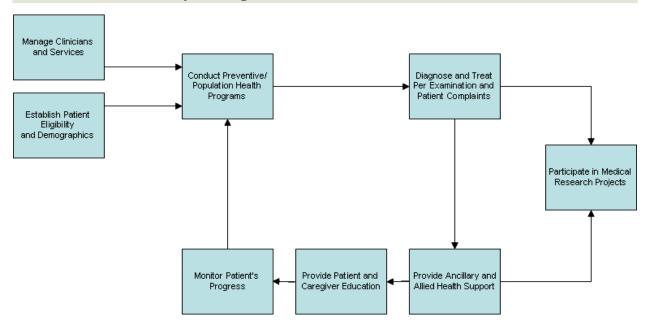
Ineligible Beneficiaries	Discharged military persons and members of their families who, for various reasons, are not entitled to certain VA benefits and services at a particular point in time.
Medical Care Practitioners	Healthcare professionals who work for, or with, VA in the delivery of healthcare products and services under the VA programs.
Medical Suppliers	Business entities that sell medical products and services to the VA.
Program Beneficiaries (Customers)	A category of VA stakeholders. This group of stakeholders is composed of people who are directly served by the VA.
Public	A category of V A stakeholders. Stakeholders falling under this category possess the power to elect people who hold public offices, the ability to pay government taxes, and assist government in other ways.
Regulators	A category of VA stakeholders. Stakeholders that belong to this group possess the authority to develop quality and performance standards that VA needs to uphold.
Sick and Disabled Military Persons	Sick or disabled military persons who have not yet been discharged from their current military duties.
Survivors	Surviving spouse and children of a deceased veteran.
Veterans	A person who served in the active military, naval, or air service, and who was discharged or released under

	conditions other than dishonorable.
Veterans Health Administration (VHA)	The VHA is one of the three Administrations under the VA. With 158 VA medical centers (VAMCs) nationwide, VHA manages one of the largest health care systems in the United States. VAMCs within a Veterans Integrated Service Network (VISN) work together to provide efficient, accessible health care to veterans in their areas. The VHA also conducts research and education, and provides emergency medical preparedness.

Links to Z22 (listed alphabetically)	
	Description
Beneficiary/Member Education Management	Upon patient/beneficiary request, or special situations such as timed reminders, patients are provided care education in diverse settings from multiple touch points. Areas of interest may include health promotion, wellness, disease management/prevention, and use of prosthetic appliances/devices. This function also includes community outreach and self-management/service capabilities.
Beneficiary/Member Management	This function encompasses the front-end of the medical care value chain. It includes all aspects of registration, enrollment, eligibility, scheduling, and patient movement, e.g., between facilities.
Financial Management	Financial Management function includes activities related to transfer of funds between stakeholders/entities related to provision of medical care.
Healthcare Delivery Management	Healthcare Delivery and Provider Management includes Healthcare Delivery, Order Management, Healthcare Management, and Management of Providers. Health Care Delivery Services encompasses the processes by which patients are provided healthcare services, e.g., primary and ambulatory, specialty, inpatient, mental health, extended care, acute care, allied health care, rehabilitation care, domiciliary care, remote care, and

	nursing home in a seamless manner. High-level activities for this function include Provide Direct Care (e.g., primary, specialized, inpatient, outpatient, dental, orthotics, mental health, prosthetic, acute, ambulatory, and emergency).
Health Data/Process Management/Collaboration	This is a strategic function that encompasses the following activities: (1) Manage internal health data, and (2) Share/Exchange Health data/information with partners.
National Emergency Health Care Management	VA plays a critical role during emergencies, both as an emergency coordinator and as a healthcare provider.

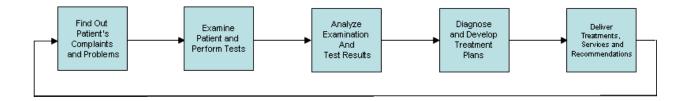
1.1. Healthcare Delivery Management



Links to Z22 (listed alphabetically)	
	Description
Conduct Preventive/Population Health Programs	Develop, implement, and manage Preventive

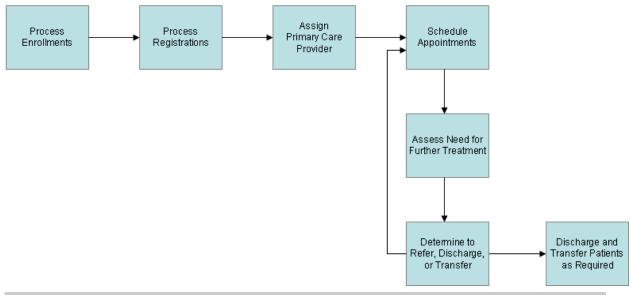
	programs for patient population. Develop, implement, and manage Population Health Programs (Health Cohorts, e.g., diabetes, stroke, hypertension, congestive heart failure, asthma). Monitor patients' satisfaction. Monitor and manage healthcare quality and safety outcomes.
Diagnose and Treat per Examination and Patient Complaints	Listen, examine, test, analyze, plan, and treat patient as required to mitigate diagnosed problem(s).
Establish Patient Eligibility and Demographics	Determine eligibility of patient to ensure care is authorized and capture eligibility and personnel demographic data, updating as required and per guidance.
Manage Clinicians and Services	Monitor the performance of healthcare clinicians and services offered by the facilities. Perform clinician credential reviews, privileging, and service/facility certification.
Monitor Patient's Progress	Monitor and follow up on patient's health status and progress.
Participate in Medical Research Projects	Conduct research per protocols to enhance healthcare and to develop, provide, leverage, and implement evidence-based clinical practice guidelines and related tools.
Provide Ancillary and Allied Health Support	Provide all categories of required support across the full spectrum of care, such as laboratory services for ancillary and physical therapy services for allied health.
Provide Patient and Caregiver Education	Prepare and disseminate health education and information materials for the benefit of both patients and participating caregivers.

1.1.1. Diagnose and Treat per Examination and Patient Complaints



Links to Z22 (listed alphabetically)	
	Description
Analyze Examination and Test Results	Read and interpret data based on examinations and tests conducted on patients. Utilize the services of experts if necessary.
Deliver Treatments, Services, and Recommendations	Provide treatment as planned. Capture patient care-encounter information.
Diagnose and Develop Treatment Plans	Leverage guidelines, protocols, disease management strategies, and research materials to determine the most appropriate intervention. Evaluate risks involved. Consult with peers, if necessary.
Examine Patients and Perform Tests	Assess, evaluate health status, and perform tests as required. Document notes using common medical lexicon/terminology, e.g., observations.
Find Out Patients' Complaints and Problems	Interview patients and get their descriptions of their problems and healthcare needs. Document stated problems or indications of possible health problems. Review patients' medical history and determine health changes that occurred from the patient's last visit.

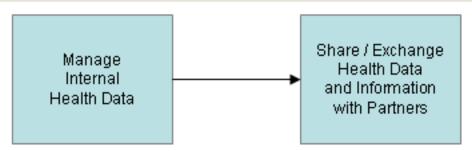
1.2. Beneficiary/Member Management



Links to Z22 (listed alphabetically)	
	Description
Assess Need for Further Treatment	To ensure full spectrum of care and full potential of treatment options, Primary Care and Specialty providers refer to other Providers if required. Normally this step would be combined with the next one, "Determine to Refer, Discharge, or Transfer." But due to the requirements of CaliberRM, the steps were split.
Assign Primary Care Provider	Assign to physician / nurse practitioner provider to meet patient's needs.
Determine to Refer, Discharge, or Transfer	Primary Care and/or Specialty providers make the decision to continue referrals within facility, transfer to another facility with different level of care, or discharge upon determining that in-house treatment plan is complete. Normally this step would be combined with the pervious one, "Assess Need for Further Treatment." But due to the requirements of CaliberRM, the steps were split.
Discharge and Transfer Patients as Required	Perform administrative routines for releasing patients from medical facilities following treatment. Facilitate the transport of patients from one facility to

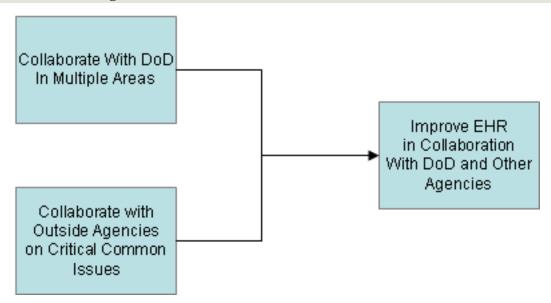
	another; or from their homes to and from medical facilities. Plan for follow-up of care.
Process Enrollment	Gather patient information and determine/verify eligibility (also includes determining catastrophic disability, verifying benefits, and verifying SSN/income). Determine enrollment priority and group threshold. Process Appeal/Notice of Disagreement (includes initiating appeals, preparing for hearing, and evaluating appeals).
Process Registrations	Assign to preferred healthcare facilities if and when possible. Establish health record and fiscal accounts at facility.
Schedule Appointments	Schedule initial and follow-up appointments with Primary Care Provider and all referrals as required for comprehensive care.

1.3. Health Data/Process Management/Collaboration

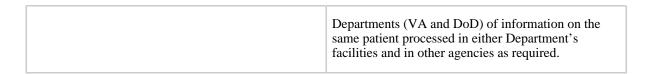


Links to Z22 (listed alphabetically)	
	Description
Manage Internal Health Data	Implement procedures and updates to ensure data is within acceptable industry standards to allow for proper internal management and analysis and external exchange.
Share/Exchange Health Data and Information with Partners	Improve sharing of health data, e.g. electronic health record, and information with all partners.

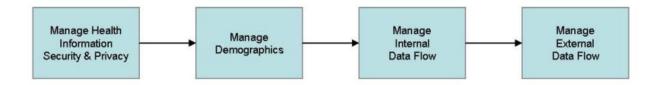
1.3.1. Share / Exchange Health Data and Information with Partners



Links to Z22 (listed alphabetically)	
	Description
Collaborate with DoD in Multiple Areas	Collaborate with DOD (sharing of resources, processes, and operations) in such areas as research, patient safety, formulary, education, geriatrics, procurement of medical/surgical/pharmaceutical supplies, guidelines/protocol development, coordination of specialized care (Traumatic Brain injury, Spinal Cord injury, Blind Rehabilitation), and coordination of healthcare. Pursue joint venture opportunities with DOD, e.g., infrastructure sharing, development of health/clinical data repository. This will result in seamless integration of business processes across departmental lines.
Collaborate with Outside Agencies on Critical Common Issues	Coordinate with partners such as CDC on public health, emergency management, and epidemiology issues.
Improve HDR in Collaboration with DoD and Other Agencies	Ensure commonality of record elements or data exchange capability to allow capture by both



1.3.2. Manage Internal Health Data



Links to Z22 (listed alphabetically)	
	Description
Manage Demographics	Implement procedures and updates to ensure individual data requests are synchronized with latest governmental and industry standards of requirements
Manage External Data Flow	Implement procedures and updates to ensure data can be exchanged per governmental and industry standards.
Manage Health Information Security & Privacy	VHA information security and privacy functions. Mainly accomplished by working with IT Cyber Security organizations.
Manage Internal Data Flow	Implement procedures and updates to ensure data can be manipulated within acceptable governmental and industry standards.

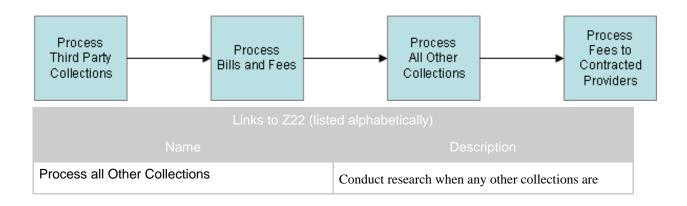
1.4. Financial Management

Execute Billings And Receivables

Perform Overall Financial Management Activities

Links to Z22 (listed alphabetically)	
	Description
Execute Billings and Receivables	Do those procedures required to ensure action is expected on receivables and payables.
Perform Overall Financial Management Activities	Perform activities to include overall finance management activities to include execution and management of General Ledger, Budget, Fixed Assets, Purchasing, Cost Accounting, Asset Management, Accounts Receivables, Inventory Management, Contract Management, Accounts Receivables, and Reconciliation.

1.4.1. Execute Billings and Receivables



	possible (e.g. liability payments) and prepare Statements of Account to collect as appropriate. Receive remittances and follow up on overdue payments.
Process Bills and Fees	Prepare Statements of Account (i.e. medical bills) and send them to the proper parties adjusting for changes in third party account remittances. Receive remittances and follow up on overdue payments.
Process Fees to Contracted Providers	Process payable fees to medical caregivers for services to veterans (VHA playing the role of a payer reimbursing contracted providers for services provided to the veterans.)
Process Third Party Collections	Conduct research when third party collections are possible and prepare Statements of Account to collect as appropriate. Receive remittances and follow up on overdue payments.

1.5. Beneficiary/Member Education Management



Links to Z22 (listed alphabetically)	
	Description
Determine Education Requirements for Different Categories	Assess requirements for patient's preventive and follow-up care, for patient's caregivers, and for community wellness, etc.
Provide Education	Provide education to patients, caregivers, and communities in accordance with assessments and resources in diverse settings from multiple touch points. Areas of interest may include: health promotion, wellness, disease

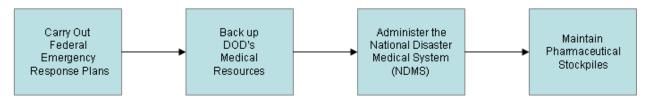
management/prevention, and use of prosthetic appliances/devices as well as community outreach and self-management/service capabilities.

1.5.1. Determine Education Requirements for Different Categories



Links to Z22 (listed alphabetically)	
	Description
Determine Education Requirements for Caregivers	Assess requirements for patients' caregivers' education to prevent problems, maintain wellness, or continue to improve a treated malady of patient while not risking the caregivers' health.
Determine Education Requirements for Communities	Assess risks to communities so can tailor health promotion, wellness, disease prevention and outreach programs most effectively.
Determine Education Requirements for Patients	Assess requirements for patients' education to prevent problems, maintain wellness, or continue to improve a treated malady.

1.6. National Emergency Healthcare Management



Links to Z22 (listed alphabetically)	
	Description
Administer the National Disaster Medical System (NDMS)	Administer the National Disaster Medical System (NDMS) with DOD, Federal Emergency Management Agency (FEMA), and the Department of Health and Human Services (HHS).
Back up DoD's Medical Resources	Back up DOD's medical resources following an outbreak of war or other emergencies involving military personnel: Provide critical human resources Share medical facilities Share lab services Share pharmacy services Share infrastructure – e.g., next generation health repository
Carry Out Federal Emergency Response Plans	 Ensure the continuity of VA medical facility operations. Carry out Federal Response Plan efforts to assist state and local governments in coping with disasters. Carry out Federal Radiological Emergency Response Plan efforts to respond to nuclear hazards. Support efforts to ensure the continuity of government during national emergencies.
Maintain Pharmaceutical Stockpiles	 Stockpile pharmaceuticals and medical supplies in the event of large scale disasters caused by weapons of mass destruction (WMD). Maintain pharmaceutical stockpiles for the Centers for Disease Control and Prevention (CDC).